

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1934	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/14/2019
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

MCKENDREE VILLAGE

**4347 LEBANON ROAD
HERMITAGE, TN 37076**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{N 000}	Initial Comments A Life Safety revisit survey was conducted on 8/14/19 for the previous deficiencies cited on 6/19/2019. The deficiencies have been corrected, and no new non compliance was found. The facility is in compliance with all regulations surveyed.	{N 000}		

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Care Facilities

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NAME OF PROVIDER OR SUPPLIER MCKENDREE VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 4347 LEBANON ROAD HERMITAGE, TN 37076	
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N 000	Initial Comments Stories: 2 Construction Type: NFPA, II (222); IBC, IB Plans available on site Constructed: 1970s Sprinklered: Yes Certified beds: 180 A Life Safety Code Survey was conducted by the State of Tennessee Department of Health Division of Health Licensure and Regulations Office of Health Care Facilities on 06/19/2019. During this Life Safety Survey, McKendree Village was found not in substantial compliance with the requirements of the Tennessee Rules and Regulations 1200-08-06, Standards for Nursing Homes, and National Fire Protection Association (NFPA) 101 Life Safety (2012 Edition). The requirements at 1200-080-06, Standards for Nursing Homes is NOT MET as evidenced by: All penetrations requiring Fire Stop shall be repaired in accordance with a tested and approved Fire Stop System meeting the requirements of ASTM E 814, Standard Test Method for Fire Tests of Through Penetration Fire Stops, or ANSI/UL 1479, Standard for Fire Tests of Through-Penetration Firestops. The system used shall be recorded and documentation shall be maintained for the life of the installation. Any Engineering Judgements requires state approval.	N 000	
N 831	1200-8-6-.08 (1) Building Standards (1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.	N 831	N831 1200-8-6-.08 (1) BUILDING STANDARDS 8/2/2019 The facility has and will continue to maintain appropriate fire walls. On or before July 12, 2019 The Maintenance staff will perform an in-service.

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Sylvia J. Burton RN, NHA*TITLE
Interim Administrator

(X6) DATE

7/11/2019

Division of Health Care Facilities

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N 831	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the physical plant and overall environment.</p> <p>The findings included:</p> <ol style="list-style-type: none"> 1. Observation on 06/19/2019 at 11:11 AM, revealed penetrations by bundles of communication wires not sealed properly and 2 holes in the 2 hour fire rated gypsum gypsum board wall above the suspended ceiling at the 1 North building and Link building the gift shop. NFPA 101, 8.3.5.1, (2012 Edition) NFPA 101, 8.3.1.2* (2012 Edition) 2. Observation on 06/19/2019 at 11:25 AM, revealed penetrations by insulated steel pipes, steel pipes, steel pipes, bundles of communication wires not sealed properly above the suspended ceiling in the 2 hour fire rated concrete block wall at the 1 North building and 1 South Building by room N 151. NFPA 101, 8.3.5.1, (2012 Edition) 3. Observation on 06/19/2019 at 11:31 AM, revealed penetrations by bundles of communication wires in the 2 hour fire rated concrete block wall above the suspended ceiling at the 1 North building and the Kitchen building. NFPA 101, 8.3.5.1, (2012 Edition) 4. Observation on 06/19/2019 at 11:35 AM, revealed penetrations by multiple electrical conduits, steel pipe, communication wires, and white flexible plastic pipe not sealed properly; the 	N 831	<p>The In-service will be conducted by the Director of Facilities Management or Designee and will include:</p> <ul style="list-style-type: none"> • Review of the regulation • Review of the statement of deficiency • Review of the plan of correction • Standards for maintaining fire rated assemblies <p>All fire penetrations in gypsum and block 1 hour and 2 hour rated walls noted under N831 will be repaired and sealed before August 2, 2019 by a certified Fire Stop contractor using tested and approved Fire Stop systems meeting the requirements of the UL assembly to which the Fire Stop is being applied.</p> <p>On or before August 2, 2019 the Maintenance Supervisor or Designee will monitor fire wall penetrations during Facilities Management's monthly preventative maintenance rounds. Documentation will be kept on file in the Facilities Management Department and reviewed by the Facilities Management Director or Supervisor.</p> <p>The Facilities Management Director will report any trends or patterns to the QA/QI committee who will determine the frequency of further monitoring.</p>	8/2/2019

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N 831	<p>Continued From page 2</p> <p>joints at the perimeter of the barrier; and 2 holes in the 2 hour fire rated wall above the suspended ceiling at the 1 North building and Link building by the Manor dining room. NFPA 101, 8.3.5.1, (2012 Edition) NFPA 101, 8.3.1.2* (2012 Edition) NFPA 101, 8.3.6.1, (2012 Edition)</p> <p>5. Observation on 06/19/2019 at 11:42 AM, revealed penetrations by insulated pipes, and bundles of communication wires not sealed properly; and the joint at the head of wall not sealed properly above the suspended ceiling in the 2 hour fire rated block wall at the Kitchen and 1 East connector breezeway. NFPA 101, 8.3.5.1, (2012 Edition) NFPA 101, 8.3.6.1, (2012 Edition)</p> <p>6. Observation on 06/19/2019 at 12:05 PM, revealed penetrations by 2 metal clad wires not sealed properly above the suspend ceiling in the 1 hour fire rated block wall at the 1 East mechanical room by the elevator. NFPA 101, 8.3.5.1, (2012 Edition)</p> <p>7. Observation on 06/19/2019 at 12:15 PM, revealed penetrations by electrical conduits not sealed properly above the suspended ceiling in the 1 hour fire rated concrete block wall of the 1 East stairwell by room E 151. NFPA 101, 8.3.5.1, (2012 Edition)</p> <p>8. Observation on 06/19/2019 at 12:32 PM, revealed penetrations by steel pipes and bundles of complication wires not sealed properly above the suspended ceiling in the 1 hour fire rated cross corridor by the 2 East elevator. NFPA 101, 8.3.5.1, (2012 Edition)</p> <p>9. Observation on 06/19/2019 at 12:59 PM, revealed a penetration by a bundle of communication wires not sealed properly above</p>	N 831	

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N 831	Continued From page 3 the suspended ceiling in the 1 hour fire rated cross corridor by room N 277. NFPA 101, 8.3.5.1, (2012 Edition) 10. Observation on 06/19/2019 at 1:50 PM, revealed multiple penetrations by insulated steel pipes and electrical conduits not sealed properly in the 1 hour fire rated gypsum board wall of the 2 East Environmental Storage room (trash collection room). NFPA 101, 8.3.5.1, (2012 Edition) The Maintenance Director was present when these deficiencies were identified and the Administrator acknowledged these deficiencies during the exit conference on 06/19/2019.	N 831	